

SEP 22 2004

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.86)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is by transmitted by facsimile to Examiner Paulos M. Natnael of the United States Patent and Trademark Office at Art Unit 2614 at Fax No. 703-872-9306 on this 22nd day of September, 2004.

Date: September 22, 2004

By: Sharon Yaborough

Sharon Yaborough

Fee
only

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: WILLIAM ALTMANN

APPLICATION No.: 09/905,318

FILED: JULY 13, 2001

FOR: CLOCK JITTER LIMITING SCHEME IN
VIDEO TRANSMISSION THROUGH
MULTIPLE STAGES

EXAMINER: PAULOS M. NATNAEL

ART UNIT: 2614

CONF. No: 6174

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Arlington, VA 22313-1450

Response to Office Action

In response to the Office Action of July 9, 2004, in the matter of the above-referenced application, please enter the following amendments and consider the following remarks. The changes to the claims begin on page 2, and the remarks begin on page 6.

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

09905318

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	9-2204	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
			PRESENT EXTRA
Total	*	18	Minus ** 20 =
Independent	*	4	Minus *** 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
			PRESENT EXTRA
Total	*		Minus ** =
Independent	*		Minus *** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
			PRESENT EXTRA
Total	*		Minus ** =
Independent	*		Minus *** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
X\$18=	
X86=	
+290=	
TOTAL	770

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	86
+290=	
TOTAL ADDIT. FEE	86

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	